

Best Available Copy

CLAIMS ONLY						SERIAL NO.		FILING DATE				
						APPLICANT(S)						
CLAIMS												
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	/					51	/	/	/			
2	/					52	/	/	/			
3	/					53	/	/	/			
4	/					54	/	/	/			
5	/					55	/	/	/			
6	/					56	/	/	/			
7	/					57	/	/	/			
8	/					58	/	/	/			
9	/					59	/	3	/			
10	/					60	/		/			
11	/					61	/		/			
12	/					62	/					
13	/					63	/					
14	/					64	/					
15	/					65	/					
16	/					66	/					
17	/					67	/					
18	/					68	/					
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28	/					78	/					
29	/					79	/					
30	/					80	/					
31	/					81	/					
32	/					82	/					
33	/					83	/					
34	/					84	/	3				
35	/					85	/					
36	/					86	/					
37	/					87	/					
38	/					88	/					
39	/					89	/					
40	/					90	/					
41	/					91	/					
42	/					92	/					
43	/					93	/					
44	/					94	/					
45	/					95	/					
46	/					96	/					
47	/					97	/					
48	/					98	/					
49	/					99	/					
50	/					100	/					
TOTAL IND.						TOTAL IND.						
TOTAL DEP.						TOTAL DEP.						
TOTAL CLAIMS	100					TOTAL CLAIMS	100					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS